

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITIVE	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>		11-10-01
O.I.P.E. CLASSIFIER	<i>[Signature]</i>		12/12
FORMALITY REVIEW	<i>[Signature]</i>	1019	12-13-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected  
 ..... Allowed  
 (Through numeral)..... Canceled  
 ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
1	3/12/03
2	3/12/03
3	3/12/03
4	3/12/03
5	3/12/03
6	3/12/03
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8	3/12/03
9	3/12/03
10	3/12/03
11	3/12/03
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42	3/12/03
43	3/12/03
44	3/12/03
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47	3/12/03
48	3/12/03
49	3/12/03
50	3/12/03

Claim	Date
Final	
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here